

# **MONTANA TRAUMA FACILITY DESIGNATION CRITERIA**

# RECENT COMMENTS FOR CONSIDERATION...

1.

The trauma team is organized and directed by a physician, physician assistant, or nurse practitioner with demonstrated competency in trauma care and is responsible for the overall provision of care for the trauma patient from resuscitation through discharge.

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2.

Physician board-certified or board eligible in a recognized specialty; with a special interest in trauma care who leads the multidisciplinary activities of the trauma program. The trauma director has the authority to affect all aspects of trauma care including oversight of clinical trauma patient care, development of clinical care guidelines, coordinating performance improvement, correcting deficiencies in trauma care, and verification of continuing trauma education.

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Physician, nurse practitioner, or physician assistant with a special interest in trauma care who leads the multidisciplinary activities of the trauma program. The trauma director should have the authority to affect all aspects of trauma care including oversight of clinical trauma patient care, development of clinical care guidelines, coordinating performance improvement, correcting deficiencies in trauma care, and verification of continuing trauma education.

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## ***Trauma Registrar***

3.

Designated trauma registrar working in concert with the trauma coordinator, with responsibility for data abstraction, entry into the trauma registry and ability to produce a variety of reports routinely and upon request. There must be sufficient dedicated hours for this position to complete the trauma registry for each trauma patient within 60 days of discharge

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4.

*Trauma Peer Review* functions with a multidisciplinary committee of medical disciplines (including the trauma coordinator) involved in caring for trauma patients to perform peer review for issues such as response times, appropriateness and timeliness of care, and evaluation of care priorities. This committee under the aegis of performance improvement meets regularly, takes attendance, has minutes, and documents how patient care issues will be addressed in the future.

5.

#### Acute Hemodialysis

In-house or transfer agreement with Regional Trauma Center

6.

#### Pediatrics

In-house or transfer agreement with Regional Trauma Center or Pediatric Hospital

Feedback regarding trauma patient transfers shall be provided to the trauma program at the transferring hospital within 72 hours of patient discharge from the receiving hospital.

7.

Trauma Education: 10 hours of trauma-related CME annually or remain current in ATLS.

E<sup>2</sup>EE<sup>2</sup>DD<sup>2</sup>

Attendance of the general surgeons at a minimum of 50% of the trauma peer review committee meetings.

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8.

Trauma education for physicians, physician assistant, or nurse practitioner providing Emergency Department coverage:  
10 hours of trauma-related CME annually or remain current in ATLS.

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9.

***Neurologic Surgery***

Trauma Education: 10 hours of trauma-related CME annually.	E <sup>2</sup>	D <sup>2</sup> .		
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10.

***Orthopaedic Surgery***

Trauma Education: 10 hours of trauma-related CME annually.	E <sup>2</sup>	E <sup>2</sup> .	D <sup>2</sup>	
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11.

Trauma nursing education: 8 hours of trauma-related education annually or maintenance of TNCC /ATCN or equivalent.	E	E	D	D
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12.

Ultrasound (Listed under ED Resources)	D	D	D	
Ultrasound (Listed under Radiological Services)	E	E	D	

13.

Radiologists are promptly available, in person or by tele-radiology, for interpretation of radiographs, CT scans, performance of complex imaging studies and interventional procedures.	E	E		
Radiologists are promptly available by tele-radiology for interpretation of radiographic studies			D	D

14.

The blood bank has an adequate supply of packed red blood cells, fresh frozen plasma, platelets, cryoprecipitate or coagulation factors to meet the needs of the injured patient.	E	D		
Massive Transfusion Policy (clinical and laboratory)	E	E	E	

15.

Neurotrauma care should be routinely evaluated as to compliance with the Brain Trauma Foundation Guidelines.	E	D		
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16.

Coordination and/or participation in community prevention activities	E	E	D	D
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